	laciniant Committee		· · · · · · · · · · · · · · · · · · ·		COVER PAGE
C	ecipient Committee ampaign Statement over Page	Type or print in	200000000000000000000000000000000000000	ERK Date Stamp	CALIFORNIA 460
	overnment Code Sections 84200-84216.5)		2013 JUL 30	PM 4: 47	一位中国
100	000245	Statement covers period	Date of election if applicable: (Month, Day, Year)		Page1 of14
		from03/17/2013			For Official Use Only
SE	E INSTRUCTIONS ON REVERSE	through06/30/2013	04/02/2013		
1.	Type of Recipient Committee: All Committees -	- Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		
	☐ Officeholder, Candidate Controlled Committee ☐ State Candidate Election Committee ☐ Recall ☐ (Also Complete Part 5) ☐ General Purpose Committee ☐ Sponsored ☐ Small Contributor Committee ☐ Political Party/Central Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Termin ☐ Amendment (Explain below)	Spe	arterly Statement ecial Odd-Year Report oplemental Preelection tement - Attach Form 495
3.	Committee Information	I.D. NUMBER 1355555	Treasurer(s)		
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTE		NAME OF TREASURER		
	Dr. Armina Gharpetian for Glendale School	Board 2013	Armina Gharpetian		
		*	MAILING ADDRESS		
			1016 E. Broadway Suite 20	17	•
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP (CODE AREA CODE/PHONE
	1016 E. Broadway Suite 207		Glendale	7925VL 270VS	205
	CITY STATE ZIP	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER,	FANY	
		1205 (818) 257-0387			
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.C	D. BOX	MAILING ADDRESS		
	CITY STATE ZIP	CODE AREA CODE/PHONE	CITY	STATE ZIP (CODE AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS		
	vote.smart2013@gmail.com				
4.	Verification				
	I have used all reasonable diligence in preparing and review	ving this statement and to the best of my know	owledge the information contained herein a	nd in the attached sched	ules is true and complete. I certify
	under penalty of perjury under the laws of the State of Califo	rnia that the foregoing is true and correct.	(0) -	01/1	-
	Executed on07/18/2013	By Armina Ghan		Ask	
	Date	-, -	Signature of Treasurer of Assistant Treasur	er	
	Executed on07/18/2013	By Armina Ghar Signature of Co	rpetian htrolling Officeholder, Candidate, State Measure Proponent	or Responsible Officer of Sponsor	-
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, State Me.	asure Proponent	
			organism of controlling cancerolder, cardidate, state we	reserved topologis	
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, State Me.	asure Proponent	FPPC Form 460 (January/05)

NAME OF OFFICEHOLDER OR CANDIDATE			1	IAME OF BALLOT MEASURE				
Armina Gharpetian								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	TRICT NUMBER IF APPLICAS	BLE)	Ē	BALLOT NO. OR LETTER	JURISDICT	ION	_	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP	1	dentify the controlling o	fficeholder, ca	andidate, or s	tate measure	proponent, if a
1016 E. Broadway 207	Glendale CA	91205	1	NAME OF OFFICEHOLDER, CA	ANDIDATE, OR P	ROPONENT		
Related Committees Not Included in this S not included in this statement that are controlled by you contributions or make expenditures on behalf of your	ou or are primarily formed		ō	OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER		-				Į.	
NAME OF TREASURER	CONTROLLED COMMIT			Primarily Formed Cal officeholder(s) or candidate				
NAME OF TREASURER	☐ YES ☐ NO		-		(s) for which th	is committee i		
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.C.	YES NO		, ,	officeholder(s) or candidate	(s) for which the	OFFICE SOL	s primarily forn	support
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.C. CITY STATE ZII	YES NO	<u> </u>	- N	officeholder(s) or candidate	(s) for which the CANDIDATE	OFFICE SOL	s primarily forn	SUPPORT OPPOSE SUPPORT
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.C.	P CODE AREA CO I.D. NUMBER CONTROLLED COMMIT	DE/PHONE TEE?		officeholder(s) or candidate IAME OF OFFICEHOLDER OR IAME OF OFFICEHOLDER OR	(s) for which the CANDIDATE CANDIDATE CANDIDATE	OFFICE SOL	S primarily form JGHT OR HELD JGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

Campaign Disclosure Statement **Summary Page**

Type or print in ink. Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA **FORM** 03/17/2013

06/30/2013 Page ___3 ___ of ___14 through _ SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Dr. Armina Gharpetian for Glendale School Board 2013 1355555 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTAL TO DATE General Elections \$ 19,424.00 1/1 through 6/30 7/1 to Date 13,800.00 16,300.00 2. Loans Received Schedule B. Line 3 20. Contributions 35,724.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ ____ 16,647.00 Received 0.00 1,155.00 21. Expenditures Made 36,879.00 Expenditures Made Expenditure Limit Summary for State Candidates 7. Loans Made Schedule H, Line 3 0.00 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 0.00 1,155.00 10. Nonmonetary Adjustment Schedule C. Line 3 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 12,732.79 To calculate Column B. add amounts in Column A to the 16,647.00 corresponding amounts *Amounts in this section may be different from amounts 22.13 from Column B of your last reported in Column B. report. Some amounts in 27,071.41 Column A may be negative 2,330.51 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only

0.00

carry over the amounts from Lines 2, 7, and 9 (if

any).

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

17. LOAN GUARANTEES RECEIVED Schedule B. Part 2 S _____

Cash Equivalents and Outstanding Debts

Schedule A Monetary Contributions Received

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

		10	whole dollars.	from03/17/2	the state of the s	FORM 46U		
SEE INSTRUCTI	ONS ON REVERSE			through _06/30/2	013	Page4 of14		
NAME OF FILER	Gharpetian for Glendale School Board 2013					D. NUMBER		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31	TE PER ELECTION TO DATE		
03/19/2013	Ramella Markarian 1101 N Pacific Glendale, CA 91202	□IND □COM □OTH □PTY □SCC	Administration Adventist Medical Center	250.00	250	.00		
03/21/2013	Alfred Aghajanian 2424 N 6th Str Burbank, CA 91504	⊠IND □COM □OTH □PTY □SCC	Loan officer Self Employed	300.00	300	.00		
03/21/2013	Roubina Der Sarkissian 1121 Ethel St Glendale, CA 91207	⊠IND □COM □OTH □PTY □SCC	Escrow officer Glenoaks Escrow	150.00	150	.00		
03/21/2013	Grigor Grigoryan 222 Monterey Rd. 606 Glendale, CA 91206	☑IND □COM □OTH □PTY □SCC	Business Owner Self Employed	150.00	150	.00		
03/22/2013	California Real Estate Political Action Committee 525 S. Virgil Ave Los Angeles, CA 90020	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000	.00		
			SUBTOTAL\$	1,850.00				
Amount re (Include all	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.)				IND – Ind COM – R (c OTH – O	itor Codes ividual ecipient Committee other than PTY or SCC) other (e.g., business entity)		
	etary contributions received this period. is 1 and 2. Enter here and on the Summary Page, Colur	nn A, Line 1.)	TOTAL \$	2,847.00	SCC-Sr	nall Contributor Committee		

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SCH	HED!	ILFA	(CONT.)	

CALIFORNIA

FORM

Statement covers period

from

03/17/2013

				through06/30/	² 2013 Pa	age5 of14
NAME OF FILER Dr. Armina Gharpetian for Glendale School Board 2013					100	D. NUMBER 355555
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31	TO DATE
03/26/2013	Eva Parseghian 364 Burchett str Glendale, CA 91203	☑IND □COM □OTH □PTY □SCC	Product Manager YP	100.00	100	00
03/27/2013	John Hart Real Estate 330 N. Brand Blvd 130 Glendale, CA 91203	□IND □COM ☑OTH □PTY □SCC		100.00	100.	00
03/28/2013	Lilit Aladadyan 1101 N. Everett Str Glendale, CA 91207	☑IND □COM □OTH □PTY □SCC	Administrator Glendale Healthy Kids	100.00	100.	00
04/09/2013	Edik Haghverdian 1114 E. Broadway str Glendale, CA 91205		Dentist Self Employed	150.00	150.	00
		□IND □COM □OTH □PTY □SCC				
			SURTOTALS	450.00		

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)

PTY - Political Party SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Sched	ule	B-	Par	t 1
Loans	Rec	eive	be	

SCHEDULE	B-PART
----------	--------

Loans Received	to whole dollars.			from03/17/2013		CALIFORN FORM	^{IA} 460	
SEE INSTRUCTIONS ON REVERSE					through06/3	0/2013	Page6_	of14
NAME OF FILER							I.D. NUMBER	
Dr. Armina Gharpetian for Glendale Sch	ool Board 2013						1355555	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
Armina Gharpetian 1016 E. Broadway Suite 207 Glendale, CA 91205		, EMSE		PAID S 0.00 FORGIVEN		%	\$_2,500.00	S_15,800.00 PER ELECTION*
†⊠ IND □ COM □ OTH □ PTY □ SCC	Üe.	s2,500.00	s	\$0.00	DATE DUE	so.oo	02/12/2013 DATE INCURRED	\$
Armina Gharpetian 1016 E. Broadway Suite 207 Glendale, CA 91205				\$ 2,000.00		RATE %	\$_2,000.00	\$ 15,800.00 PER ELECTION*
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		so.oo	\$	s0.00	DATE DUE	\$0.00	03/19/2013 DATE INCURRED	S
Armina Gharpetian 1016 E. Broadway Suite 207 Glendale, CA 91205				PAID s0.00 FORGIVEN	\$10,000.00	RATE %	\$_10,000.00	CALENDAR YEAR \$ 15,800.00 PER ELECTION*
† IND □ COM □ OTH □ PTY □ SCC		so.oo	s <u>10,000.00</u>	sc.00	DATE DUE	\$0.00	03/27/2013 DATE INCURRED	s
		SUBTOTALS \$	12,000.00	\$ 2,000.0	0\$ 12,500.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period				\$	15,800.00			
(Total Column (b) plus unitemized loans 2. Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	paid or forgiven.)			\$	2,000.00	IN CC OT PT	H – Other (e.g., Y – Political Party	ommittee PTY or SCC) business entity)
Net change this period. (Subtract Line Enter the net here and on the Summary				NET \$	13,800.00 (ay be a negative number)	SC	C - Small Contrib	outor Committée
*Amounts forgiven or paid by another party also n	nust be reported on Schedule A.)						

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

** If required.

Schedule B – Part 1 (Continuation Sheet)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE B - PAI	RT1(CONT.
CALIFORNIA	160

Statement covers period

Loans Received		to whole dollars.			from03/17/2013		FORM 400	
SEE INSTRUCTIONS ON REVERSE					through06/3	0/2013	Page7	of14
NAME OF FILER				-			I.D. NUMBER	
Dr. Armina Gharpetian for Glendale School Bo	pard 2013						1355555	
OCC OCC I FUNDER	AN INDIVIDUAL, ENTER UPATION AND EMPLOYER IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVE THIS PERIOD	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Armina Gharpetian 1016 E. Broadway Suite 207 Glendale, CA 91205 TIME IND COM OTH PTY SCC		s	s3,000.00	PAID \$ 0.00 FORGIVEN \$ 0.00	s_3,000.00	% RATE %	\$_3,000.00 04/04/2013 DATE INCURRED	\$ 15,800.00 PER ELECTION**
Armina Gharpetian 1016 E. Broadway Suite 207 Glendale, CA 91205		s	\$300.00	PAID \$ 0.00 FORGIVEN \$ 0.00		% RATE%	\$300.00 04/25/2013 DATE INCURRED	S_15,800.00 PER ELECTION**
Armina Gharpetian 1016 E. Broadway 207 Glendale, CA 91205		s0.00	\$300.00	\$ 0.000 PAID \$ 0.000 PORGIVEN \$ 0.000	2 \$300.00	% RATE	\$300.00 05/01/2013 DATE INCURRED	\$S00.00 PER ELECTION **
Armina Gharpetian 1016 E. Broadway 207 Glendale, CA 91205		\$0.00	s	PAID \$0.00 FORGIVEN \$0.00		% RATE %	\$200.00 05/28/2013 DATE INCURRED	\$SOU.00 PER ELECTION**
	Š	SUBTOTALS \$	3,800.00\$	0.0	3,800.00	0.00		

†Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY-Political Party

SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

Schedule E Payments Made

SEE INSTRUCTIONS ON REVERSE

Type or print in ink. Amounts may be rounded to whole dollars.

Stateme	ent covers period	CALIFORNIA 160
from	03/17/2013	FORM 400
through _	06/30/2013	Page8 of14
		I.D. NUMBER
		1355555

NAME OF FILER Dr. Armina Gharpetian for Glendale School Board 2013 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. campaign consultants MTG meetings and appearances RFD returned contributions CNS contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PET candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services professional services (legal, accounting) VOT voter registration legal defense PRO LEG campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE AMOUNT PAID (IF COMMITTEE, ALSO ENTER LD. NUMBER) CODE OR DESCRIPTION OF PAYMENT AARC TV 2,000.00 TEL 1110 Sonora Ave 207 Glendale, CA 91201 AABC TV TEL 1,000.00 1110 Sonora Ave 207 Glendale, CA 91201 LIT #1021 2.758.27 Cornerstone Printing 423 Washington Street 6th Floor San Francisco, CA 94111 Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 5,758.27 Schedule E Summary 27,071.41 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$

> FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule E

Type or print in ink.

SCHEDU	JLEE	(CONT.)	

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	from03/17/2013	FORM 460
SEE INSTRUCTIONS ON REVERSE		through06/30/2013	Page 9 of 14
NAME OF FILER	I.D. NUMBER		
Dr. Armina Gharpetian for Glendale School B	1355555		
CODES: If one of the following codes accura	itely describes the payment, you may enter the o	ode. Otherwise, describe the paymen	nt.

Dr. Armina Gharpetian for Glendale School Board 2013					1355555
CODES: If one of the following codes accurately descri	bes the	payment, y	ou may enter the code.	Otherwise,	describe the payment.
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LT campaign literature and mailings	MTG OFC PET PHO POL POS	office expen- petition circul phone banks polling and s postage, deli-	l appearances ses ating	RAD RFD SAL TEL TRC TRS TSF VOT WEB	returned contributions
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE OR	DESCRIPTIO	ON OF PAYMENT AMOUNT PAID
E SULL V SULL SU				(2.02)	200.0

CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Mail file #1020	325.00
Robocall # 1026	150.00
mail file	500.00
phone file #1029	390.00
Robo calls #1027	300.00
	Mail file #1020 Robocall # 1026 mail file phone file #1029

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

1,665.00

Schedule E	
(Continuation	Sheet)
Payments Mac	le

SCHEDULE E (CONT.)

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	from 03/17/2013	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE		from 03/17/2013 through 06/30/2013	Page 10 of 14	
NAME OF FILER			I.D. NUMBER	
Dr. Armina Gharpetian for Glendale School Bo	pard 2013		1355555	
CODES: If one of the following codes accura	tely describes the payment, you may enter the c	-		

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals fundraising events FND POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* IND POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR **DESCRIPTION OF PAYMENT** AMOUNT PAID

LIT		410.93
TEL	TV ads and airtime	2,000.00
LIT	#1023	3,591.94
PRT		750.00
LIT		2,995.20
	LIT	TEL TV ads and airtime LIT #1023 PRT

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

9,748.07

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

CALIFORNIA

Statement covers period

FORM Payments Made 03/17/2013 from_ through 06/30/2013 Page ___11__ of __14__ SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Dr. Armina Gharpetian for Glendale School Board 2013 1355555 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications radio airtime and production costs RAD CNS campaign consultants meetings and appearances returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries t.v. or cable airtime and production costs CVC civic donations petition circulating candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FIL TRC fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals FND independent expenditure supporting/opposing others (explain)* IND postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) print ads NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Armenian Media Group of America, Inc. #1034 500.00 TEL 1520 West Glenoaks Blvd Glendale, CA 91201 Political Data Inc. phone file 300.00 P.O. BOX 59570 Norwalk, CA 90652 Armenian Media Group of America, Inc TEL #1037 400.00 1520 West Glenoaks Blvd Glendale, CA 91201 Barev TV TEL 2,500.00 413 W. Windsor 2 Glendale, CA 91204

Robo calls #1036

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

4,139.30

439.30

Political Tel Systems

472 1/2 Roxby Dr Beverly Hills, CA 90212

SCH	FDU	IFF	(CONT.)	
2011			(00141.)	

Statement covers period CALIFORNIA Amounts may be rounded to whole dollars. FORM 03/17/2013 from through ___06/30/2013 Page __ 12 __ of __ 14 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER 1355555

Dr. Armina Gharpetian for Glendale School Board 2013 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances returned contributions OFC SAL campaign workers' salaries CTB contribution (explain nonmonetary)* office expenses CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FIL POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG professional services (legal, accounting) VOT voter registration legal defense PRT WEB information technology costs (internet, e-mail) campaign literature and mailings print ads NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID Copy Network LIT 1040 706.32 3600 Ocean View Blvd 9 Glendale, CA 91208

1039 Document Preparation Solutions PRO 1,000.00 4727 Wilshire Blvd 301 Los Angeles, CA 90010 Roval Vanak #1038 1,800.00 108 N. Brand Blvd Glendale, CA 91203 Ad First Steps PRT 400.00 3950 Foothill blvd Glendale, CA 91214 TEL 1,000.00 High Vision Tv

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

4,906.32

5406 San Fernando Rd Glendale, CA 91203

Schedule E	
(Continuation Sheet))
Payments Made	

Type or print in ink.

Amounts may be rounded to whole dollars.

SCH	EDI	HE	E	CONT.)	
SUL		JLE		CONT	

CALIFORNIA

Statement covers period

FORM 03/17/2013 from. through 06/30/2013 Page __ 13 __ of __ 14 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Dr. Armina Gharpetian for Glendale School Board 2013 1355555 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. MTG meetings and appearances RFD returned contributions CNS campaign consultants OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)* CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs PHO phone banks candidate travel, lodging, and meals FIL candidate filing/ballot fees TRC polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events POL transfer between committees of the same candidate/sponsor IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF professional services (legal, accounting) VOT voter registration LEG legal defense campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Graphic design for flyers 450.00 Orange Dot Graphics PRO 1121 Ethel Str. Glendale, CA 91207 City of Glendale FIL 404.45 613 E. Broadway 110 Glendale, CA 91206 SUBTOTAL \$ * Payments that are contributions or independent expenditures must also be summarized on Schedule D. 854.45

Schedule I Miscellaneous Increases to Cash		Type or print in ink. Amounts may be rounded to whole dollars.		SCHEDU		
				Statement covers period from03/17/2013		california 460
SEE INSTRUCTION	IS ON REVERSE			through	06/30/2013	Page14 of14
NAME OF FILER						I.D. NUMBER
Dr. Armina Gh	narpetian for Glendale School Board 2013					1355555
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DE	SCRIPTION OF R	ECEIPT	AMOUNT OF INCREASE TO CASH
					*	
Attach additi	ional information on appropriately labeled continuation sheets.				SUBTOTAL	.\$
Schedule I	Summary					
1. Itemized in	creases to cash this period.	************************			\$	<u>0</u>
2. Unitemized	increases to cash of under \$100 this period.				\$ 22.1	3
3. Total of all i	nterest received this period on loans made to others. (School	edule H, Column (e	e).)		\$0.0	<u>o</u>
	llaneous increases to cash this period. (Add Lines 1, 2, and Page, Line 14.)			TOTAL	\$22.1	3